



Overview of 2019 HealthChoice Quality Assurance Activities

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Maryland HealthChoice Program

| Managed Care Organization | Market Share as of April 2020 |
|--|-------------------------------|
| Priority Partners | 25.0% |
| AMERIGROUP Community Care | 23.1% |
| Maryland Physicians Care | 17.6% |
| UnitedHealthcare | 12.0% |
| MedStar Family Choice | 7.5% |
| Kaiser Permanente of the Mid-Atlantic States | 6.1% |
| University of Maryland Health Partners | 3.8% |
| Aetna Better Health of Maryland | 2.7% |
| Jai Medical Systems | 2.2% |

Quality Assurance Activities

| Quality Assurance Area | Activities |
|------------------------------------|---|
| MCO Operations | <ul style="list-style-type: none">• Systems Performance Review• Early and Periodic Screening, Diagnosis, and Treatment (EPSDT)/Healthy Kids Record Reviews• Network Adequacy Validation |
| Enrollee and Provider Satisfaction | <ul style="list-style-type: none">• Enrollee Satisfaction Survey (CAHPS)• Provider Satisfaction Survey |
| Quality Measurement | <ul style="list-style-type: none">• HEDIS Reporting• Value-Based Purchasing Initiative• Consumer Report Card• Performance Improvement Projects• NCQA Accreditation |
| Program Management and Oversight | <ul style="list-style-type: none">• Annual Technical Report• Performance Monitoring and Financial Sanction Policies• MCO Quality Meetings and Survey |

Systems Performance Review (SPR)

- The SPR is an assessment of each MCO's administrative processes, policies, and procedures.
- MDH administers the full SPR on a three-year cycle. The full SPR was conducted in 2019 for activities in CY 2018, meaning all standards were reviewed.
- MCOs that do not meet minimum compliance scores for a standard are required to submit Corrective Action Plans (CAPs), which are reviewed annually.

EPSDT/Healthy Kids Medical Record Review

- The EPSDT Medical Record Review assesses the timely delivery of EPSDT services to children and adolescents enrolled in an MCO.
 - Medical records are randomly selected in order to assess provider compliance with program standards.
 - Nurse reviewers conduct all medical record reviews in provider offices.
- MCOs are required to demonstrate an 80% compliance rate for each component.
- 8 of 9 MCOs met the minimum compliance score for all review components.

Network Adequacy Validation

- MDH began evaluating the accuracy of MCO online provider directories in 2015.
- MCO PCPs were surveyed about contact information, provider type, accepting new Medicaid patients, and access to scheduling routine and urgent appointments.
- All MCOs were required to submit CAPs to correct PCP details in their online provider directories.
- One MCO was required to submit a CAP to comply with routine appointment access requirements.
- MDH will continue to evaluate the MCO directories annually.

Enrollee Satisfaction Survey

- MDH conducts an annual Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey to evaluate member satisfaction with their health care and improve member experience.
- The CAHPS survey measures aspects of care for which HealthChoice members are the best and/or only source of information, including:
 - Provider Communication
 - Getting Needed Care
 - Getting Care Quickly
 - Customer Service
- Adult and child enrollees were most satisfied with how well doctors communicate with them. However, customer service showed a significant decline compared to last year's results.

CAHPS is a registered trademark of AHRQ.

Provider Satisfaction Survey

- MDH conducts an annual Provider Satisfaction Survey of HealthChoice primary care providers (PCPs).
- The survey assesses PCP satisfaction and experience with HealthChoice enrollees, MCOs, and program operation, including:
 - No-Show HealthChoice Appointments
 - Finance Issues
 - Customer Service/Provider Relations
 - Coordination of Care/Case Management
 - Utilization Management
 - Overall Satisfaction
- The survey also identifies MCO operational strengths and areas in need of improvement.
- Overall satisfaction with HealthChoice showed improvement for a third year in a row. Finance Issues and Customer Service/Provider Relations also showed significant improvement since last year.

HEDIS Reporting

- HealthChoice MCOs are required to collect Healthcare Effectiveness Data and Information Set (HEDIS®) measures each year.
- HEDIS compliance audits were conducted for HealthChoice MCOs.
- HealthChoice MCOs reported on 45 HEDIS measures in 2018.
- The Maryland average outperformed the national HEDIS average on 83% of the measures collected.

HEDIS is a registered trademark of NCQA.

Value-Based Purchasing Initiative

- The Value-Based Purchasing (VBP) initiative is a set of performance measures designed to improve performance by applying incentives and disincentives.
- For VBP 2019, there were 13 measures. 10 of the 13 are HEDIS measures and 3 are selected by MDH and calculated from encounter data.
- Methodology for VBP 2019:
 - MDH sets an incentive target and disincentive target for each performance measure.
 - MCOs can score in a neutral range, meaning it neither gains nor loses money.
 - Each incentive and disincentive is worth 1/13th of 1% of MCO CY 2018 capitation.

VBP Measures for CY 2018

- **HEDIS Measures**

- Adolescent Well Care
- Adult BMI Assessment
- Asthma Medication Ratio
- Breast Cancer Screening
- Childhood Immunization Status (Combo 3)
- Comprehensive Diabetes Care – HbA1c Testing
- Controlling High Blood Pressure
- Immunizations For Adolescents
- Postpartum Care
- Well Child Visits, Ages 3-6

- **MDH Measures**

- Ambulatory Care Services for SSI Children
- Ambulatory Care Services for SSI Adults
- Lead Screenings for Children Ages 12-23 Months

Consumer Report Card

- The Consumer Report Card assists enrollees with selecting one of the HealthChoice MCOs.
- Report Card star ratings are calculated using performance measures from HEDIS, VBP, and CAHPS survey results.
- The Consumer Report Card's formatting was updated in 2019 to improve readability.
- The Consumer Report Card is updated every year and shared on Maryland Health Connection and the HealthChoice website.

Six Report Card Categories

- Access to Care
- Doctor Communication and Service
- Keeping Kids Healthy
- Care for Kids with Chronic Illness
- Taking Care of Women
- Care for Adults with Chronic Illness

Performance Improvement Projects

- MCOs are responsible for reporting annually on two performance improvement projects (PIPs) selected by MDH.
- For CY 2019, the PIPs were Asthma Medication Ratio and Lead Screening in Children.
- MDH assesses plan progress on PIPs using HEDIS and encounter data.
- For Asthma Medication Ratio, three MCOs showed improvement in CY 2018 over their plan's individual baseline HEDIS scores in CY 2017.
- For Lead Screening in Children, CY 2018 was the first remeasurement year. Eight MCOs showed improvement in CY 2018 over their plan's individual baseline HEDIS[®] rate and three MCOs improved their encounter measure rate.

NCQA Accreditation

- MDH began requiring HealthChoice MCOs to acquire health plan accreditation from the National Committee for Quality Assurance (NCQA) in 2015.
- NCQA Health Plan Accreditation bases its ratings on plan operations, HEDIS scores, and CAHPS performance.
- All 9 MCOs have NCQA accreditation.
- Jai Medical Systems and Kaiser Permanente of the Mid-Atlantic States obtained excellent accreditation status and are ranked first and second nationally in NCQA's Medicaid Health Insurance Plan Ratings for 2019-2020.

Annual Technical Report

- MDH is required to evaluate the quality of care MCOs provide to HealthChoice participants on an annual basis.
- The Annual Technical Report (ATR) describes the findings of Maryland's quality improvement activities by MCO.
- MDH works with its External Quality Review Organization vendor to develop an independent technical report of HealthChoice MCO performance.

Available Online:

<https://mmcp.health.maryland.gov/healthchoice/Pages/HealthChoice-Quality-Assurance-Activities.aspx>

MCO Performance Monitoring Policy

- The MCO Performance Monitoring Policy lays out minor, moderate, and major corrective actions MDH may employ in four HealthChoice quality assurance areas:
 - Network Adequacy
 - Systems Performance Review
 - EPSDT/Healthy Kids Review
 - HEDIS Performance Measures

MCO Financial Sanction Policy

- Beginning in CY 2020, MDH developed a financial sanction methodology and policy that was added to the MCO contract.
- Financial penalties may be assessed for failure to comply with laws, regulations, contract terms, policies, or deadlines.
- MDH may also require MCOs to submit corrective action plans instead of imposing a fine for noncompliance.
- All fines collected will be deposited in the HealthChoice Performance Incentive Fund.

MCO Quality Meetings and Survey

- The Quality Meetings are opportunities to speak with each MCO about their quality improvement efforts and discuss priorities defined by MDH.
- The Quality Survey topics for the meetings are currently in development. Examples of past topics are:
 - Leadership, Staff, and Subcontractors
 - Quality Improvement Projects
 - Behavioral Health
 - Program Integrity
 - Case Management
- MDH has postponed holding Quality Meetings with each MCO because of COVID-19.

Overview of 2019 HealthChoice Quality Assurance Activities

Quality Program Results

CY 2018 Systems Performance Review Results

| Managed Care Organization | # of CAPs Reviewed |
|--|--------------------|
| Aetna Better Health | 1 |
| AMERIGROUP Community Care | 5 |
| Jai Medical Systems | 0 |
| Kaiser Permanente | 5 |
| Maryland Physicians Care | 4 |
| MedStar Family Choice | 2 |
| Priority Partners | 3 |
| UnitedHealthcare | 1 |
| University of Maryland Health Partners | 4 |

CY 2018 EPSDT Record Review Results

| COMPONENTS | AGGREGATE SCORES | | |
|--|------------------|---------|---------|
| | CY 2016 | CY 2017 | CY 2018 |
| Health and Developmental History | 92% | 92% | 94% |
| Comprehensive Physical Exam | 96% | 96% | 97% |
| Laboratory Tests / At-Risk Screenings | 85% | 82% | 87% |
| Immunizations | 83% | 90% | 93% |
| Health Education and Anticipatory Guidance | 95% | 94% | 94% |

CY 2018 Network Adequacy Validation Results

| Number of Contracted PCPs | Sample Size | Successful PCP Telephone Surveys |
|---|-------------|----------------------------------|
| 21,882 | 2,037 | 1,139 |
| Online Directory Validation | | HealthChoice MCO Aggregate |
| PCP Listed in Online Directory | | 95% |
| PCP's Practice Location Matched Survey Response | | 89% |
| PCP's Practice Telephone Number Matched Survey Response | | 92% |
| Specifies PCP Accepts New Medicaid Patients and Matches Survey Response | | 64% |
| Specifies Ages of Patients Seen | | 95% |
| Specifies Languages Spoken by PCP | | 77% |
| Specifies Practice Accommodations for Patients with Disabilities | | 61% |

CY 2018 Enrollee Satisfaction Survey Results

| | Surveys Mailed | Surveys Returned | CY 2017 Response Rate | CY 2018 Response Rate |
|-----------------------|----------------|------------------|-----------------------|-----------------------|
| HealthChoice Adults | 12,150 | 2,443 | 22% | 21% |
| HealthChoice Children | 14,850 | 3,618 | 27% | 25% |

| Composite Measures | HC Adults | | HC Children | |
|------------------------------|-----------|---------|-------------|---------|
| | CY 2017 | CY 2018 | CY 2017 | CY 2018 |
| How Well Doctors Communicate | 92% | 92% | 94% | 94% |
| Getting Care Quickly | 82% | 84% | 89% | 88% |
| Customer Service | 88% | 88% | 88% | 86% |
| Getting Needed Care | 82% | 83% | 83% | 82% |

CY 2018 Provider Satisfaction Survey Results

| | Surveys Mailed | Surveys Returned | CY 2017 Response Rate | CY 2018 Response Rate |
|-------------------------------|----------------|------------------|-----------------------|-----------------------|
| Primary Care Providers (PCPs) | 7,044 | 1,266 | 18% | 19% |

| Measures | CY 2017 | CY 2018 |
|--------------------------------------|---------|---------|
| No-Show HealthChoice Appointments | 79% | 85% |
| Finance Issues | 48% | 54% |
| Customer Service/Provider Relations | 47% | 52% |
| Coordination of Care/Case Management | 45% | 44% |
| Utilization Management | 40% | 40% |
| Overall Satisfaction | 82% | 86% |

HEDIS 2019 Performance Summary

- Measures with significant improvements include:
 - Diabetes Monitoring for People with Diabetes and Schizophrenia (SMD)
 - Lead Screening in Children (LSC)
 - Statin Therapy for Patients With Diabetes (SPD) – Statin Adherence 80%
 - Immunizations for Adolescents (IMA) – Combination 2
 - Childhood Immunization Status (CIS) – Combination 5
- Measures with significant decline were:
 - Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)
 - Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)
 - Comprehensive Diabetes (CDC) – Eye Exam (Retinal) Performed

2019 Value Based Purchasing Results

| | ACC | JMS | KPMAS | MPC | MSFC | PPMCO | UHC | UMHP |
|---------------|-----|-----|-------|-----|------|-------|-----|------|
| Incentives | 4 | 12 | 7 | 0 | 2 | 2 | 1 | 5 |
| Neutrals | 3 | 0 | 1 | 2 | 2 | 3 | 1 | 5 |
| Disincentives | 6 | 1 | 5 | 11 | 9 | 8 | 11 | 3 |
| Net Totals | -2 | 11 | 2 | -11 | -7 | -6 | -10 | 2 |

NCQA Accreditation Status for HealthChoice MCOs

| Managed Care Organization | Accreditation Status |
|--|----------------------|
| Aetna Better Health | Interim* |
| AMERIGROUP Community Care | Commendable |
| Jai Medical Systems | Excellent |
| Kaiser Permanente | Excellent |
| Maryland Physicians Care | Accredited |
| MedStar Family Choice | Commendable |
| Priority Partners | Commendable |
| UnitedHealthcare | Accredited |
| University of Maryland Health Partners | Accredited |

* Aetna joined HealthChoice in fall 2017 and holds an interim status until more data can be reported to NCQA.

2019 Consumer Report Card

2019

HealthChoice Performance Report Card for Consumers

Maryland's Medicaid Managed Care Program

KEY

- ★ ★ ★ Above HealthChoice Average
- ★ ★ HealthChoice Average
- ★ Below HealthChoice Average

This Report Card shows how the health plans in HealthChoice compare to each other. You may use this Report Card to help you choose a health plan. To choose a plan call 1-855-642-8572 (TDD: 1-855-642-8573) or visit www.marylandhealthconnection.gov.

If you are having trouble getting health care from your health plan or your doctor, try calling the health plan for customer service. If you still need help, call the HealthChoice Help Line at 1-800-284-4510 (TDD: 800-977-7389). For more information visit www.marylandhealthconnection.gov/assets/MCO-Comparison-Chart.pdf



| HEALTH PLANS | PERFORMANCE AREAS | | | | | |
|--|---|----------------------------------|----------------------|------------------------------------|----------------------|--------------------------------------|
| | ACCESS to CARE | DOCTOR COMMUNICATION and SERVICE | KEEPING KIDS HEALTHY | CARE for KIDS with CHRONIC ILLNESS | TAKING CARE of WOMEN | CARE for ADULTS with CHRONIC ILLNESS |
| AETNA BETTER HEALTH* 1-866-827-2710 | <i>* Aetna Better Health is a new HealthChoice MCO and ratings are not yet available.</i> | | | | | |
| AMERIGROUP COMMUNITY CARE 1-800-600-4441 | ★ ★ | ★ ★ | ★ ★ ★ | ★ | ★ ★ | ★ ★ |
| JAI MEDICAL SYSTEMS 1-888-524-1999 | ★ ★ ★ | ★ ★ | ★ ★ ★ | ★ ★ | ★ ★ ★ | ★ ★ ★ |
| KAISER PERMANENTE 1-855-249-5019 | ★ | ★ ★ | ★ ★ | ★ ★ | ★ ★ ★ | ★ ★ ★ |
| MARYLAND PHYSICIANS CARE 1-800-953-8854 | ★ ★ | ★ ★ | ★ | ★ ★ | ★ | ★ |
| MEDSTAR FAMILY CHOICE 1-888-404-3549 | ★ | ★ ★ | ★ ★ | ★ ★ | ★ | ★ ★ |
| PRIORITY PARTNERS 1-800-654-9728 | ★ ★ ★ | ★ ★ ★ | ★ ★ | ★ ★ | ★ | ★ |
| UNITEDHEALTHCARE 1-800-381-8821 | ★ ★ ★ | ★ ★ | ★ ★ | ★ ★ | ★ | ★ ★ |
| UNIVERSITY OF MARYLAND HEALTH PARTNERS 1-800-730-8530 | ★ | ★ ★ | ★ | ★ ★ | ★ ★ | ★ |



Thank You!

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